

For KCC Use:

Effective Date: 4-8-06

District # \_\_\_\_\_

SGA?  Yes  No

# NOTICE OF INTENT TO DRILL

Must be approved by KCC five (5) days prior to commencing well

Expected Spud Date \_\_\_\_\_ month \_\_\_\_\_ day \_\_\_\_\_ year

Spot \_\_\_\_\_ East  
SE SE SW Sec 6 Twp 34 S. R. 41  West

OPERATOR: License # 5278 ✓

Name: EOG Resources, Inc.

Address: 3817 NW Expressway, Suite 500

City/State/Zip: Oklahoma City, Oklahoma 73112

Contact Person: Sheila Rogers

Phone: 405-246-3236

330 feet from  N / S  Line of Section  
2310 feet from  E / W  Line of Section

Is SECTION  Regular  Irregular?

(Note: Locate well on Section Plat on Reverse Side)

County: MORTON

Lease Name: USA Well #: 6 #1

Field Name: \_\_\_\_\_

Is this a Prorated/Spaced Field?  Yes  No ✓

Target Formation(s): CHEROKEE

Nearest Lease or unit boundary: 330' ✓

Ground Surface Elevation: 3399' feet MSL

Water well within one-quarter mile:  yes  no ✓

Public water supply within one mile:  yes  no ✓

Depth to bottom of fresh water: 280'

Depth to bottom of usable water: 300' 350'

Surface Pipe by Alternate:  1  2

Length of Surface Pipe Planned to be set: 1700' ✓

Length of Conductor pipe required: 40'

Projected Total Depth: 4800'

Formation at Total Depth: CHEROKEE ✓

Water Source for Drilling Operations:

Well  Farm Pond  Other \_\_\_\_\_

DWR Permit #: \_\_\_\_\_

(Note: Apply for Permit with DWR )

Will Cores Be Taken?:  Yes  No

If yes, proposed zone: \_\_\_\_\_

CONTRACTOR: License #: 30684 ✓

Name: Abercrombie Rtd, Inc.

RECEIVED  
KANSAS CORPORATION COMMISSION

APR 03 2006

CONSERVATION DIVISION  
WICHITA, KS

Well Drilled For:

Well Class:

- |  |                                      |   |  |
|--|--------------------------------------|---|--|
| <input type="checkbox"/> Oil                       | <input type="checkbox"/> Enh Rec     | <input type="checkbox"/> Infield            | <input checked="" type="checkbox"/> Mud Rotary |
| <input checked="" type="checkbox"/> Gas            | <input type="checkbox"/> Storage     | <input type="checkbox"/> Pool Ext.          | <input type="checkbox"/> Air Rotary            |
| <input type="checkbox"/> OWWO                      | <input type="checkbox"/> Disposal    | <input checked="" type="checkbox"/> Wildcat | <input type="checkbox"/> Cable                 |
| <input type="checkbox"/> Seismic; # of Holes _____ | <input type="checkbox"/> Other _____ |   |  |

If OWWO: old well information as follows:

Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

Original Completion Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

Directional, Deviated or Horizontal wellbore?  Yes  No

If yes, true vertical depth: \_\_\_\_\_

Bottom Hole Location \_\_\_\_\_

KCC DKT # \_\_\_\_\_

## AFFIDAVIT

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55- 101 et, seq. It is agreed that the following minimum requirements will be met:

1. Notify the appropriate district office **prior** to spudding of well;
2. A copy of the approved notice of intent to drill **shall be** posted on each drilling rig;
3. The minimum amount of surface pipe as specified below **shall be set** by circulating cement to the top; in all cases surface pipe **shall be set** through all unconsolidated materials plus a minimum of 20 feet into the underlying formation;
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is **necessary prior to plugging**;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water to surface within **120 days** of spud date. Or pursuant to Appendix "B" - Eastern Kansas surface casing order #133,891-C, which applies to the KCC District 3 area, alternate II cementing must be completed within 30 days of the spud date or the well shall be plugged. **In all cases, NOTIFY district office** prior to any cementing.

I hereby certify that the statements made herein are true and to the best of my knowledge and belief.

Date: 3/31/06 Signature of Operator or Agent: Breanna Vargas Title: OPERATIONS ASSISTANT

For KCC Use ONLY

API # 15- 129-21777-00-00

Conductor pipe required None feet

Minimum surface pipe required 380 feet per Alt.

Approved by: DRW 4-3-06

This authorization expires: 10-3-06

(This authorization void if drilling not started within 6 months of effective date.)

Spud date: \_\_\_\_\_ Agent: \_\_\_\_\_

### Remember to:

- File Drill Pit Application (form CDP-1) with Intent to Drill;
- File Completion Form ACO-1 within 120 days of spud date;
- File acreage attribution plat according to field proration orders;
- Notify appropriate district office 48 hours prior to workover or re-entry;
- Submit plugging report (CP-4) after plugging is completed;
- Obtain written approval before disposing or injecting salt water.
- If permit has expired (See: authorized expiration date) please check the box below and return to the address below

Well Not Drilled - Permit Expired

Signature of Operator or Agent: \_\_\_\_\_

Date: \_\_\_\_\_

6  
34  
410

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

Plat of acreage attributable to a well in a prorated or spaced field

CONSERVATION DIVISION

If the intended well is in a prorated or spaced field, please fully complete this side of the form. If the intended well is in a spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please show all the wells within 1 mile of the boundaries of the proposed acreage attribution unit for gas wells and within 1/2 mile of the boundaries of the proposed acreage attribution unit for oil wells.

API No. 15- \_\_\_\_\_  
Operator EOG RESOURCES, INC.  
Lease USA  
Well Number 6 #1  
Field \_\_\_\_\_

Location of Well: County: MORTON  
\_\_\_\_\_ 330 feet from  N / S  Line of Section  
\_\_\_\_\_ 2310 feet from  E / W  Line of Section  
Sec 6 Twp 34 S. R. 41  East  West

Number of Acres attributable to well: \_\_\_\_\_

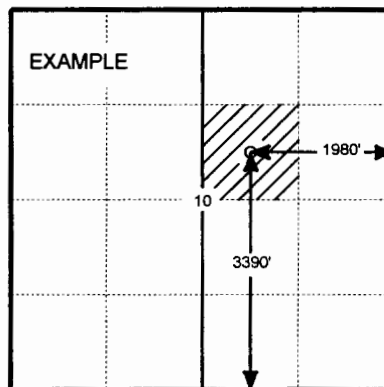
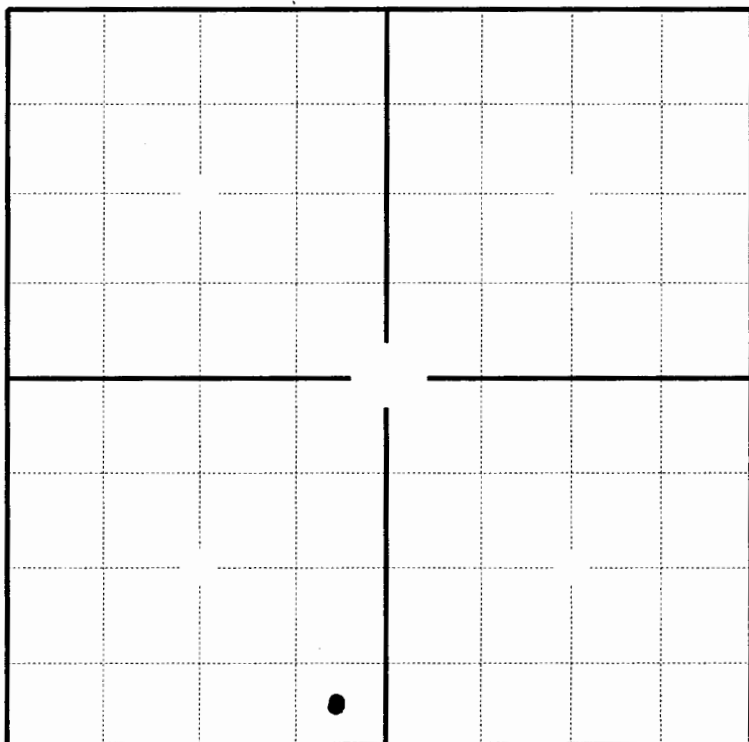
Is Section  Regular or \_\_\_\_\_ Irregular

QTR/QTR/QTR of acreage: SE - SE - SW

If Section is irregular, locate well from nearest corner boundary.  
Section corner used: \_\_\_\_\_ NE \_\_\_\_\_ NW \_\_\_\_\_ SE \_\_\_\_\_ SW

PLAT

(Show location of the well and shade attributable acreage for prorated or spaced wells.)  
(Show footage to nearest lease or unit boundary line)



SEWARD CO.

In plotting the proposed location of the well, you must show;

1. The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding sections, 4 sections, etc.;
2. The distance of the proposed drilling location from the section's south/north and east/west; and
3. The distance to the nearest lease or unit boundary line.
4. If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (CO-7 for oil wells; CG-8 for gas wells).

APR 03 2006


Form CDP-1

April 2004

Form must be Typed

APPLICATION FOR SURFACE PIT CONSERVATION DIVISION  
WICHITA, KS

Submit in Duplicate

Operator Name: <b>EOG Resources, Inc.</b>		License Number: <b>5278</b>
Operator Address: <b>3817 NW Expressway Suite #500 Oklahoma City, OK 73112</b>		
Contact Person: <b>Sheila Rogers</b>		Phone Number: ( <b>405</b> ) <b>246 - 3236</b>
Lease Name & Well No.: <b>USA 6 #1</b>		Pit Location (QQQQ): <b>C SE SE SW</b>
Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit <small>(If WP Supply API No. or Year Drilled)</small>	Pit is: <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: <b>12,500</b> (bbls)	Sec. <b>6</b> Twp. <b>34</b> R. <b>41</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <b>330</b> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <b>2310</b> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <b>Morton</b> County
Is the pit located in a Sensitive Ground Water Area? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Chloride concentration: _____ mg/l <small>(For Emergency Pits and Settling Pits only)</small>
Is the bottom below ground level? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Artificial Liner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	How is the pit lined if a plastic liner is not used?
Pit dimensions (all but working pits): <b>125</b> Length (feet) <b>125</b> Width (feet) <b>N/A: Steel Pits</b> Depth from ground level to deepest point: <b>5</b> (feet)		
If the pit is lined give a brief description of the liner material, thickness and installation procedure.		Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring.
Distance to nearest water well within one-mile of pit <b>1683</b> feet    Depth of water well <b>220</b> feet		Depth to shallowest fresh water <b>118</b> feet. <b>60</b> Source of information: <b>KKK 63 6</b> <input checked="" type="checkbox"/> measured <input type="checkbox"/> well owner <input type="checkbox"/> electric log <input type="checkbox"/> KDWR
<b>Emergency, Settling and Burn Pits ONLY:</b> Producing Formation: _____ Number of producing wells on lease: _____ Barrels of fluid produced daily: _____ Does the slope from the tank battery allow all spilled fluids to flow into the pit? <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Drilling, Workover and Haul-Off Pits ONLY:</b> Type of material utilized in drilling/workover: <b>Gel</b> Number of working pits to be utilized: <b>None</b> Abandonment procedure: <b>Evaporation/dewater and backfilling of reserve pit.</b> Drill pits must be closed within 365 days of spud date.
I hereby certify that the above statements are true and correct to the best of my knowledge and belief.		
<b>3/31/06</b> Date		 Signature of Applicant or Agent

15129217770000

KCC OFFICE USE ONLY			
Date Received: <b>4/3/06</b>	Permit Number: _____	Permit Date: <b>4/3/06</b>	Lease Inspection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No